



Medicaid Advisory Committee Minutes

February 27, 2019
IGCS Conference Room C

Members Present

Mr. Matt Brooks, Ms. Allison Taylor, Mr. Evan Reinhardt, Mr. Michael Colby, Ms. Barbara McNutt, Ms. Katy Stafford-Cunningham, Mr. Rodney King, Ms. Tabitha Arnett, Dr. Leila Alter, Ms. Elizabeth Eichhorn, Ms. Terry Cole, Mr. Kevin Moore, Dr. Jennifer Walthall

I. Call to Order/Opening Comments

Chair Matt Brooks opened the meeting of the Medicaid Advisory Committee (MAC). He welcomed the members and guests. He was accompanied by Medicaid Director, Allison Taylor. MAC members introduced themselves. Chair Brooks gave a quick overview of the meeting agenda and reviewed remaining 2019 dates of MAC meetings.

II. Approval of November Minutes

The minutes from the November MAC meeting were formally approved by MAC members and Chair Brooks.

III. Medicaid Director's Update

Director Taylor introduced Dr. Jennifer Walthall, FSSA Secretary, to discuss the recent calls with stakeholders. Director Taylor introduced Hannah Burney, OMPP's Senior Coverage & Benefits Manager, to present on the SUD waiver and workgroup. She discussed recent changes and progress including expanded services and provider networks. Director Taylor took a moment to acknowledge the collaboration between OMPP and DMHA while working on the waiver. Kevin Moore, DMHA's Director, spoke briefly on how wonderful it has been to work closely with members and providers. Dr. Walthall praised the cross-collaboration and how many different divisions within FSSA worked together. Ms. Burney then gave an update on waiver logistics.

Director Taylor then provided the committee with an update on the retro prior authorization workgroup. She shared that OMPP/FSSA has been working closely with Representative Cindy Kirchhofer. She explained certain issues with retro-eligibility and explained FSSA is working with providers to address.

IV. Rules

Ms. Chelsea Princell, from the Office of the General Counsel presents rule:

- a. LSA 18-546: Credentials Verification Organization (CVO) Rule



This proposed rule will amend 405 IAC 1-1.4-3 to clarify credentialing standards and add 405 IAC 1-1.4-3.5 to establish credentialing criteria. These changes are being made to update administrative rules to reflect current state code per HEA 1007 (2018). The last step: the Notice of Public Hearing was published on February 13, 2019 in the Indiana Register and the Indianapolis Star. The next step: A public hearing will be held on March 7, 2019 at 10:00 am in Conference Center Room 19. After the public hearing, the rule will be submitted to the Office of the Attorney General for approval.

Ms. Princell then asked for questions regarding any of the presented rules. There were none.

V. FSSA Updates

Director Taylor introduced the Deputy Medicaid Director, Shane Hatchett, to give an update on the OMPP Quality & Outcomes website. Deputy Director Hatchett discussed the managed care oversight and the different types of compliance and quality meetings that were held with the MCEs and agency/division leadership. The meetings created quality improvement plans and feed into the agency's Quality Strategy Plan. Deputy Director Hatchett also discussed the annual external quality review that is performed by Burns & Associates.

Deputy Director Hatchett then asked for comments or questions. Mr. Michael Colby asked about feedback of the site and Mr. Hatchett shared that the feedback so far has been positive and it is being updated regularly. Chair Brooks asked if the reports that are collected from the MCEs are available to view. Deputy Director Hatchett shared that they are available on the new quality and outcomes website.

Deputy Director Hatchett introduced Ms. Renee Gallagher, Program Integrity Section Director in OMPP. Ms. Gallagher gave an update on Program Integrity and audits, which included updates on implementing changes from the 2016 Provider Audit Workgroup. Deputy Director Hatchett discussed the three public hearings across the state where the agency heard from lobbyists, providers, and many others. Deputy Director Hatchett reviewed the workgroup recommendations. These included reducing the lookback period, improve audit methodology, increase communication, and provide more education.

Ms. Gallagher then presented PI Rule updates to the committee. She walked members through the overall structure and extrapolation methodology.

VI. MCE Presentations

Director Taylor introduced the health plans and explained that they would be giving an informative presentation on the MCE claims process.

Mr. Jeff Chapman, from CareSource, began the presentation. He spoke on the claim submission process, claim rejections, claim adjudication, and claim payments/denials. He then spoke about medical claims data and shared CareSource claims data. Representatives from Anthem, MDwise, and MHS also shared their claim data with the committee.

Director Taylor concluded this section by explaining to the committee that she would like to continue to include informative presentations on MCE processes in future MAC meetings.

VII. EnCred Update

OMPP's Provider Services Section Director, Michael Cook, shared an update on FSSA EnCred. Mr. Cook shared information on the upcoming spring workshops that will be taking place all over the state. There was also a new provider bulletin released for the month of February. Mr. Cook discussed the continued partnership with Conduent and how they are continuing to build their communication efforts. He also briefly spoke on delegated credentialing.

VIII. Public Comments

Chair Brooks asked if there were any public comments. There were none.

IX. Conclusion

Chair Brooks let attendees know that the next meeting will be held on Thursday, May 23rd.

Chair Brooks then adjourned the meeting.